FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

FORM 1	ORGANIZATION			FEC MAIL CENTS	
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	i
CALIFORN	VIA DI	MOCRATIC E	XECUTIVE BO	ARD	
ADDRESS (number a	nd street)	P. O. BOX 61	3162		
(Check if a is changed)		NORTH MIAN	/i /i	FL	33261
			СПУ	STATE	ZIP CODE
COMMITTEE'S E-MA	address	SS (Please provide only one e USDemocrati	-mail address) icExecutiveBoar	ds@hot	mail.com
COMMITTEE'S WEB	PAGE AD	DRESS (URL)			
(Check if address is changed)					
2. DATE 11	l" ′ 9	° ′ Ž0 1Ž Č			
3. FEC IDENTIFIC	CATION N	UMBER C			
4. IS THIS STATE	MENT 🗵	NEW (N) OR	AMENDED (A)		
I certify that I have	examined ti	nis Statement and to the bes	t of my knowledge and belief it	t is true, correc	t and complete.
Type or Print Name	of Treasure	, DAVID EINS	TEIN		
Signature of Treasure	er	Dinoten.		Date 11	" ′ 09° ′ 20′12 ′
NOTE: Submission of	false, erron	•	may subject the person signing ON SHOULD BE REPORTED W		o the penalties of 2 U.S.C. §437g.
Office Use			For further Information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	(P. 1., 1., 1., 1., 1., 1., 1., 1., 1., 1.	D				
	(Revised 02/2009)	Page 2				
TYPE OF COMM Candidate Co						
(a) Th	is committee is a principal campaign committee. (Complete the candidate information below.)				
`'	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate						
Candidate Party Affiliation	Office Sought: House Senate President	State District				
(c) Th	is committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Committee:						
(d) Th	(National, State is committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Political Actio	n Committee (PAC):					
(e) Th	is committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:				
	Corporation Corporation w/o Capital Stock	Labor Organization				
	Membership Organization Trade Association	Cooperative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	is committee supports/opposes more than one Federal candidate, and is NOT a separate s mmittee. (i.e., nonconnected committee)	egregated fund or party				
×	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint Fundraising Representative:						
,	s committee collects contributions, pays fundraising expenses and disburses net proceeds for t mmittees/organizations, at least one of which is an authorized committee of a federal candidate.	•				
Committees Participating in Joint Fundraiser						
1.						
2.						
3.						

FEC Form 1 (Revised (02/2009)	Page 3
Write or Type Committee Name)	
CALIFORNIA DI	EMOCRATIC EXECUTIVE BOARD	
6. 'Name of Any Connected (Organization, Affiliated Committee, Joint Fulfidralsing Representative, or L	eadership PAC Sponsor
NONE		1 1 1 1 1 1 1 1 1 1
		1 1 1 1 1 1 1 1 1
		
Mailing Address		
	CITY STATE	ZIP CODE
		ZIF CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: idea books and records. 	ntify by name, address (phone number - optional) and position of the person	in possession of committee
,DAVII	DEINSTEIN	
Full Name	<u> </u>	
Mailing Address	P. O. BOX 613162	
		20004
	NORTH MIAMI	33261 - -
Title or Position	CITY STATE	ZIP CODE
IEXECUTIVE DIR	RECTOR Telephone number 786	_ 763, _ 7862 ,
	Telephone number	J 1
	d address (phone number optional) of the treasurer of the committee; and	the name and address of
any designated agent (e.g.,	assistant treasurer).	
Full Name DAVII of Treasurer	D EINSTEIN	
Mailing Address	P. O. BOX 613162	
-	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	NORTH MIAMI	3,326,1 , _ , , ,
Title or Perities	CITY STATE	ZIP CODE
Title or Position [TREASURER		[763 _,

Page 4

Full Name of Designated Agent

Mailing Address

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Telephone number

CITY

Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

BANI	KOF AMERIÇA		
Mailing Address	13450 WEST DIXIE HIGHWAY		<u> </u>
		<u> </u>	
	NORTH MIAMI	I FL	33161 -
	СПҮ	STATE	ZIP CODE
Name of Bank, Depository	, etc.		
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Mailing Address			
		لباا	
	CITY	STATE	ZIP CODE

Federal Election Co ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this first	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 11 10 2012
Delivery Confirmation or S	ignature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registrati	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PY	11/30/2012
PREPARER	DATE PREPARED
(3/2005)	